

Fill in this information to identify the case:

Debtor Name Divine Dining, LLC

United States Bankruptcy Court for the: Northern District of Texas

Case number: 18-32805-sgj11☐ Check if this is an amended filing

Official Form 425C

Monthly Operating Report for Small Business Under Chapter 11

12/17

Month: 10/1/2019-10/31/2019Date report filed: 11/20/2019
MM / DD / YYYYLine of business: Fast Food RestaurantNAISC code: 722300

In accordance with title 28, section 1746, of the United States Code, I declare under penalty of perjury that I have examined the following small business monthly operating report and the accompanying attachments and, to the best of my knowledge, these documents are true, correct, and complete.

Responsible party: Divine Dining, LLC

Original signature of responsible party

Printed name of responsible party

Jason A Rae, Trustee

1. Questionnaire

Answer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicated.

If you answer **No** to any of the questions in lines 1-9, attach an explanation and label it **Exhibit A**.

	Yes	No	N/A
1. Did the business operate during the entire reporting period?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Do you plan to continue to operate the business next month?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Have you paid all of your bills on time?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Did you pay your employees on time?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Have you deposited all the receipts for your business into debtor in possession (DIP) accounts?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Have you timely filed your tax returns and paid all of your taxes?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Have you timely filed all other required government filings?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Are you current on your quarterly fee payments to the U.S. Trustee or Bankruptcy Administrator?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Have you timely paid all of your insurance premiums?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you answer **Yes** to any of the questions in lines 10-18, attach an explanation and label it **Exhibit B**.

10. Do you have any bank accounts open other than the DIP accounts?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11. Have you sold any assets other than inventory?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12. Have you sold or transferred any assets or provided services to anyone related to the DIP in any way?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13. Did any insurance company cancel your policy?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14. Did you have any unusual or significant unanticipated expenses?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15. Have you borrowed money from anyone or has anyone made any payments on your behalf?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16. Has anyone made an investment in your business?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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In accordance with title 28, section 1746, of the United States Code, I declare under penalty of perjury that I have examined the following small business monthly operating report and the accompanying attachments and, to the best of my knowledge, these documents are true, correct, and complete.

Responsible party: Divine Dining, LLC

Original signature of responsible party _____

Printed name of responsible party Jason A Rae, Trustee**1. Questionnaire**

Answer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicated.

Yes No N/A

If you answer No to any of the questions in lines 1-9, attach an explanation and label it Exhibit A.

- | | | | |
|--|-------------------------------------|-------------------------------------|-------------------------------------|
| 1. Did the business operate during the entire reporting period? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Do you plan to continue to operate the business next month? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you paid all of your bills on time? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Did you pay your employees on time? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. Have you deposited all the receipts for your business into debtor in possession (DIP) accounts? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6. Have you timely filed your tax returns and paid all of your taxes? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 7. Have you timely filed all other required government filings? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Are you current on your quarterly fee payments to the U.S. Trustee or Bankruptcy Administrator? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Have you timely paid all of your insurance premiums? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If you answer Yes to any of the questions in lines 10-18, attach an explanation and label it Exhibit B.

- | | | | |
|---|--------------------------|-------------------------------------|-------------------------------------|
| 10. Do you have any bank accounts open other than the DIP accounts? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 11. Have you sold any assets other than inventory? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 12. Have you sold or transferred any assets or provided services to anyone related to the DIP in any way? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 13. Did any insurance company cancel your policy? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 14. Did you have any unusual or significant unanticipated expenses? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 15. Have you borrowed money from anyone or has anyone made any payments on your behalf? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 16. Has anyone made an investment in your business? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Debtor Name Divine Dining, LLCCase number 18-32805-sgj11

17. Have you paid any bills you owed before you filed bankruptcy?

☐ ☒ ☐

18. Have you allowed any checks to clear the bank that were issued before you filed bankruptcy?

☐ ☒ ☐**2. Summary of Cash Activity for All Accounts****19. Total opening balance of all accounts**\$ 41,848.33

This amount must equal what you reported as the cash on hand at the end of the month in the previous month. If this is your first report, report the total cash on hand as of the date of the filing of this case.

20. Total cash receipts

Attach a listing of all cash received for the month and label it *Exhibit C*. Include all cash received even if you have not deposited it at the bank, collections on receivables, credit card deposits, cash received from other parties, or loans, gifts, or payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit C*.

Report the total from *Exhibit C* here.\$ 0.00**21. Total cash disbursements**

Attach a listing of all payments you made in the month and label it *Exhibit D*. List the date paid, payee, purpose, and amount. Include all cash payments, debit card transactions, checks issued even if they have not cleared the bank, outstanding checks issued before the bankruptcy was filed that were allowed to clear this month, and payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit D*.

Report the total from *Exhibit D* here.- \$ 45.79**22. Net cash flow**

Subtract line 21 from line 20 and report the result here.

+ \$ -45.79This amount may be different from what you may have calculated as *net profit*.**23. Cash on hand at the end of the month**

Add line 22 + line 19. Report the result here.

Report this figure as the *cash on hand at the beginning of the month* on your next operating report.= \$ 45,802.54

This amount may not match your bank account balance because you may have outstanding checks that have not cleared the bank or deposits in transit.

3. Unpaid Bills

Attach a list of all debts (including taxes) which you have incurred since the date you filed bankruptcy but have not paid. Label it *Exhibit E*. Include the date the debt was incurred, who is owed the money, the purpose of the debt, and when the debt is due. Report the total from *Exhibit E* here.

24. Total payables\$ 0.00*(Exhibit E)*

Debtor Name Divine Dining, LLCCase number 18-32805-sgj11**4. Money Owed to You**

Attach a list of all amounts owed to you by your customers for work you have done or merchandise you have sold. Include amounts owed to you both before, and after you filed bankruptcy. Label it *Exhibit F*. Identify who owes you money, how much is owed, and when payment is due. Report the total from *Exhibit F* here.

25. **Total receivables** \$ 0.00
(Exhibit F)

5. Employees

26. What was the number of employees when the case was filed? 23
27. What is the number of employees as of the date of this monthly report? 0

6. Professional Fees

28. How much have you paid this month in professional fees related to this bankruptcy case? \$ 0.00
29. How much have you paid in professional fees related to this bankruptcy case since the case was filed? \$ 0.00
30. How much have you paid this month in other professional fees? \$ 0.00
31. How much have you paid in total other professional fees since filing the case? \$ 0.00

7. Projections

Compare your actual cash receipts and disbursements to what you projected in the previous month. Projected figures in the first month should match those provided at the initial debtor interview, if any.

	<u>Column A</u>		<u>Column B</u>		<u>Column C</u>
	Projected	—	Actual	=	Difference
	Copy lines 35-37 from the previous month's report.		Copy lines 20-22 of this report.		Subtract Column B from Column A.
32. Cash receipts	\$ <u>0.00</u>	—	\$ <u>0.00</u>	=	\$ <u>0.00</u>
33. Cash disbursements	\$ <u>0.00</u>	—	\$ <u>0.00</u>	=	\$ <u>0.00</u>
34. Net cash flow	\$ <u>0.00</u>	—	\$ <u>0.00</u>	=	\$ <u>0.00</u>
35. Total projected cash receipts for the next month:					\$ <u>0.00</u>
36. Total projected cash disbursements for the next month:					- \$ <u>0.00</u>
37. Total projected net cash flow for the next month:					= \$ <u>0.00</u>

Debtor Name Divine Dining, LLC

Case number 18-32805-sgj11

8. Additional Information

If available, check the box to the left and attach copies of the following documents.

- ☒ 38. Bank statements for each open account (redact all but the last 4 digits of account numbers).
- ☐ 39. Bank reconciliation reports for each account.
- ☐ 40. Financial reports such as an income statement (profit & loss) and/or balance sheet.
- ☐ 41. Budget, projection, or forecast reports.
- ☐ 42. Project, job costing, or work-in-progress reports.

Divine Dining LLC
Cash Summary

	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19
Beginning Balance	14,621.20	21,772.19	60,066.39	79,194.79	110,917.61	114,168.72	148,490.41	318,914.70	186,004.51	184,649.32	178,305.89	177,363.22	176,991.05	183,426.27	41,848.33
CASH RECEIPTS															
Deposits 0742 (Cash deposits)		13,178.79	46,144.71	48,232.87	44,743.19	40,245.70	74,015.44	25,000.00	-	-	-	-	6,481.01	104.52	-
Deposits 0742 (Transfer from 2156)		71,250.00	72,000.00	33,620.00	-	-	-	-	373.20	-	-	-	-	-	-
Deposits 0742 (Worldpay) Note 1		-	-	45,917.68	71,447.63	81,979.65	76,296.59	15,012.63	-	-	-	-	-	-	-
Deposits 2156 (cash deposits)	7,284.99	76,015.37	-	-	-	-	-	-	-	-	-	-	-	-	-
Deposits 2156 (WorldPay)	-	5,632.98	81,788.96	25,538.50	-	-	-	-	-	-	-	-	-	-	-
Withdrawals 2156 (transfer to 0742)	-	(71,250.00)	(72,000.00)	(33,620.00)	-	-	-	-	(373.20)	-	-	-	-	-	-
Process from Asset Sale	-	-	-	-	-	-	128,912.49	-	-	-	-	-	-	-	-
Total Cash Receipts	21,906.19	94,827.14	127,933.67	119,689.05	116,190.82	122,225.35	279,224.52	40,012.63	-	-	-	-	6,481.01	104.52	-
CASH DISBURSEMENTS															
Trust Expenses (Note 2)															
ABC Lawn Care	-	-	86.97	86.97	86.97	86.97	86.97	86.97	-	-	-	-	-	-	-
Adelphi Group Ltd	-	7,500.00	7,500.00	7,500.00	19,254.42	-	11,754.42	17,017.60	-	-	-	-	-	-	-
ARAMARK UNIFORM SERVICES	-	331.08	359.90	546.27	465.79	526.45	397.96	-	93.99	-	-	-	-	-	-
Atmos Energy	-	355.73	126.86	258.29	-	532.34	574.94	-	-	-	-	-	-	-	-
Bank Fee	35.00	8.00	41.00	35.00	35.00	-	50.00	35.00	-	-	-	-	-	-	-
Bassham	-	16,991.80	43,337.28	32,501.30	40,511.70	38,096.78	38,442.65	-	-	-	-	-	-	-	-
Cardona Foods, Inc.	-	2,973.00	2,729.40	3,857.70	3,121.20	1,503.90	5,832.60	-	-	-	-	-	-	-	-
City of Irving	-	440.56	-	799.80	1,399.80	90.26	1,037.07	3,530.41	-	399.22	-	-	-	-	-
Dallas County	-	-	-	-	-	-	-	3,151.20	-	-	-	-	-	-	-
Delta P Filtration Services	-	-	-	163.84	163.84	-	163.84	-	-	-	-	-	-	-	-
GoDaddy	-	307.20	127.66	-	-	-	-	-	-	-	-	-	-	-	-
Hartford	-	220.75	1,092.95	1,092.95	1,092.95	1,092.95	1,654.95	1,092.95	872.20	872.20	872.20	-	-	-	-
Humanity.com	-	-	756.00	-	-	-	-	-	-	-	-	-	-	-	-
Intuit QuickBooks	-	214.49	37.31	-	37.31	37.31	-	-	-	-	-	-	-	-	-
International Sureties, LTD	-	-	-	-	-	-	-	-	-	118.00	-	-	-	-	-
Marshall Law	-	-	-	-	-	-	-	-	-	-	-	-	-	44,760.24	-
Kimbrough Fire Extinguisher	-	-	-	158.08	-	-	-	-	-	-	-	-	-	-	-
Lain, Faulkner & Co	-	-	-	-	-	-	-	-	-	-	-	-	-	46,767.07	-
Lain, Faulkner & Co - Trustee	-	-	-	-	-	-	-	-	-	-	-	-	-	50,109.36	-
Mark Ondras -Plumbing and Sewer Services	-	-	-	-	-	-	119.50	-	-	-	-	-	-	-	-
Moore Disposal Inc	-	530.25	530.25	530.25	530.25	530.25	530.25	-	-	-	-	-	-	-	-
NCR	-	-	302.21	302.21	302.21	302.21	302.21	302.21	-	-	-	-	-	-	-
NuCO2	-	178.62	163.57	192.03	81.11	278.60	86.79	-	-	-	-	-	-	-	-
Payroll	-	14,422.95	35,793.29	27,368.43	33,125.05	30,899.83	30,923.54	11,080.75	-	-	-	-	-	-	-
Protection 1 ADT	-	-	45.41	100.56	-	45.41	45.41	45.79	41.41	49.78	45.79	45.79	45.79	45.79	45.79
QuickBooks	-	-	-	37.31	-	-	-	-	-	-	-	-	-	-	-
Roto Rooter	-	-	-	-	-	474.60	-	-	-	-	-	-	-	-	-
R & S Franchising	-	-	-	-	-	-	-	50,131.59	-	-	-	-	-	-	-
Sentex	99.00	-	198.00	99.00	99.00	99.00	-	198.00	-	-	-	-	-	-	-
Southwaste	-	-	202.37	-	-	307.67	-	-	-	-	-	-	-	-	-
Spectrio	-	-	29.23	58.46	29.23	29.23	29.23	-	-	29.23	-	-	-	-	-
Spectrum	-	516.43	517.08	517.08	516.99	516.96	200.43	-	-	-	-	-	-	-	-
Stanley Works	-	-	540.13	-	-	-	-	-	-	-	-	-	-	-	-
Tax (Sales)	-	8,660.23	9,485.87	10,152.58	10,095.53	10,865.92	10,033.14	9,174.83	-	-	-	-	-	-	-
Texoma Cash Register	-	791.85	-	-	791.85	-	-	-	-	-	-	-	-	-	-
Town East Heating	-	-	-	588.61	-	-	-	-	-	-	-	-	-	-	-
Trust BackFlow	-	-	-	-	180.00	-	-	-	-	-	-	-	-	-	-
TXU	-	2,090.00	4,802.53	1,019.51	1,019.51	1,552.02	1,479.33	-	-	-	-	-	-	-	-
US Trustee	-	-	-	-	-	-	4,875.00	-	-	4,875.00	-	326.38	-	-	-
Web Host Agents	-	-	-	-	-	-	180.00	-	-	-	-	-	-	-	-
Worldpay	-	-	-	-	-	-	-	2,075.52	347.59	-	24.68	-	-	-	-
Chargeback - Breakup Fee	-	-	-	-	-	-	75,000.00	-	-	-	-	-	-	-	-
	134.00	56,532.94	108,805.27	87,966.23	112,939.71	87,903.66	108,800.23	172,922.82	1,355.19	6,343.43	942.67	372.17	45.79	141,682.46	45.79
ENDING CASH BALANCE	21,772.19	60,066.39	79,194.79	110,917.61	114,168.72	148,490.41	318,914.70	186,004.51	184,649.32	178,305.89	177,363.22	176,991.05	183,426.27	41,848.33	41,802.54

Note 1: Includes collections of sales accruing port sale (relating to closing adjustment).

Note 2: Certain of the following expenses paid related to post-sale time period (relating to closing adjustment).

Exhibit A

Explanation to Question # 2:

On February 25, 2019, the United States Bankruptcy Court for the Northern District of Texas approved and executed the sale of Divine Dining, LLC to Lonestar Fast Foods, LLC. The sale closed on February 26, 2019.

Exhibit B

Explanation to Question # 11, 12, 13:

On February 25, 2019, the United States Bankruptcy Court for the Northern District of Texas approved and executed the sale of Divine Dining, LLC to Lonestar Fast Foods, LLC. The sole member of Lonestar Fast Foods, LLC is the 50% member of the debtor.

At the date of sale, all employees were transferred to the new owner and the insurance policy was cancelled by the trustee.

DIVINE DINING LLC BANKRUPTCY
JASON A RAE TRUSTEE
400 N ST PAUL STE 600
DALLAS TX 75201

Speak to a dedicated business solutions expert
at 1-888-755-2172 — a one-stop number for
both your business and personal needs.

ACCOUNT SUMMARY FOR PERIOD OCTOBER 01, 2019 - OCTOBER 31, 2019

Commercial Checking [REDACTED] 0742		DIVINE DINING LLC BANKRUPTCY	
Previous Balance 09/30/19	\$41,848.33	Number of Days in Cycle	31
0 Deposits/Credits	\$0.00	Minimum Balance This Cycle	\$41,802.54
1 Checks/Debits	(\$45.79)	Average Collected Balance	\$41,811.40
Service Charges	\$0.00		
Ending Balance 10/31/19	\$41,802.54		

ACCOUNT DETAIL FOR PERIOD OCTOBER 01, 2019 - OCTOBER 31, 2019

Commercial Checking [REDACTED] 0742		DIVINE DINING LLC BANKRUPTCY		
<i>Date</i>	<i>Description</i>	<i>Deposits/Credits</i>	<i>Withdrawals/Debits</i>	<i>Resulting Balance</i>
10/07	ACH Withdrawal PROTECTIONONE PAYMENT 100719 DIVINE DINING, LLC 956424311		\$45.79	\$41,802.54
Total		\$0.00	\$45.79	

Thank you for banking with us.

PAGE 1 OF 2

What should I do if I find an error or problem on my statement?

In case of error or questions about your electronic transfers telephone us at 1-888-755-2172 or write us at Capital One, N.A., 7933 Preston Rd. Plano, Texas 75024, Attn: Customer Service Center as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt.

For small business accounts: Please refer to your Electronic Fund Transfer Agreement/Disclosure for additional information.

For consumer accounts: We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

1. Tell us your name and account number (if any).
2. Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
3. Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.